## 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
WORKING FAMILIES FOR HAWAII	C C00490193
Check If 24-hour report	
Full Name (Last, First, Middle Initial) of Payee HENDRIX MIYASAKI SHIN ADVERTISING	te
HENDRIA WII FASARI SHIN ADVERTISING	09 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1580 MAKALOA STREET	09 17 2012
SUITE 945	ount
City State Zip Code	63949.68
HONOLULU HI 96814 Trans	saction ID : SE.4265
Purpose of Expenditure Category/ Office Sou	
lype	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
LINDA LINGLE Check Or	ne: Support X Oppose
Calendar Year-To-Date Per Election Disbursen	ment For: Primary 🔀 General
for Office Sought 63949.68 2012	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	te
	M M / D D / Y Y Y Y
Mailing Address	
	ount
City State Zip Code	
Purpose of Expenditure Category/ Office Soil	ught: House State:
Type	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Check Or	ne: Support Oppose
Calendar Year-To-Date Per Election Disbursen	ment For: Primary General
	Other (specify)
	<u> </u>
(a) SUBTOTAL of Itemized Independent Expenditures	63949.68
(4) 00210112 01 1011200 113050110111 215011111111111111111111111111	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7
(c) TOTAL Independent Expenditures	63949.68
	00070.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political	
party committee) any political party committee or its agent.	
Guy Fujimura [Electronically Filed] Date 09	17 2012
Signature	